

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

Rhode Island Hope PAC

ADDRESS (number and street)

607 14th Street, NW

Suite 800

☐Check if different  
than previously  
reported. (ACC)

Washington

DC

20005

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00431601

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report(Q1)☐July 15  
Quarterly Report(Q2)☐October 15  
Quarterly Report(Q3)☒January 31  
Quarterly Report(YE)☐July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)(c) 12-Day  
**PRE**-Election  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post**-Election  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

07

01

2007

through

12

31

2007

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Grace Diaz

Signature of Treasurer

Electronically Filed by Grace Diaz

Date

01

31

2008

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 12/2004)

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
Rhode Island Hope PAC

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	7	0	1	2	0	0	7

To:

M	M	D	D	Y	Y	Y	Y
1	2	3	1	2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <span>2007</span>		22500.00
(b) Cash on Hand at Beginning of Reporting Period .....	8915.79	
(c) Total Receipts (from Line 19) .....	153491.00	198491.00
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	162406.79	220991.00
7. Total Disbursements (from Line 31) .....	106194.62	164778.83
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	56212.17	56212.17
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name  
Rhode Island Hope PAC

Report Covering the Period:

From:

M M D D Y Y W Y  
0 7 0 1 2 0 0 7

To:

M M D D Y Y W Y  
1 2 3 1 2 0 0 7

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	139266.00	176766.00
(i) Itemized (use Schedule A) .....	1725.00	1725.00
(ii) Unitemized .....	140991.00	178491.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	12500.00	20000.00
(c) Other Political Committees (such as PACs) .....	153491.00	198491.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....		
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	153491.00	198491.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	153491.00	198491.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)	0.00	0.00
(i) Federal Share.....		
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	32094.62	43778.83
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	32094.62	43778.83
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	74100.00	121000.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	106194.62	164778.83
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	106194.62	164778.83

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	153491.00	198491.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	153491.00	198491.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	32094.62	43778.83
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	32094.62	43778.83

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 42

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Rhode Island Hope PAC

**A.**

Full Name (Last, First, Middle Initial)

Mary P. Wheeler

Mailing Address 19705 Stough Farm Road

City

Cornelius

State

NC

Zip Code

28031

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Wheeler TV

Occupation

TV Producer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 1 7 / 2 0 0 7

Transaction ID: C3633200

Amount of Each Receipt this Period

5000.00

**B.**

Full Name (Last, First, Middle Initial)

John P. Freeman

Mailing Address 2329 Wilmot Avenue

City

Columbia

State

SC

Zip Code

29205

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
University of South Carol-  
ina

Occupation

Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 2 / 2 0 0 7

Transaction ID: C3563750

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Joshua Bekenstein

Mailing Address 52 High Rock Road

City

Wayland

State

MA

Zip Code

01778

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Bain Capital

Occupation

Investor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 2 1 / 2 0 0 7

Transaction ID: C3623830

Amount of Each Receipt this Period

5000.00

**SUBTOTAL** of Receipts This Page (optional) .....

10500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 42

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Rhode Island Hope PAC

**A.**

Full Name (Last, First, Middle Initial)

Brian R. Strange

Mailing Address 12100 Wilshire Boulevard  
Suite 1900

City State Zip Code  
Los Angeles CA 90025

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self Employed

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 1 8 / 2 0 0 7

Transaction ID: C3608050

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Morris Panner

Mailing Address 4614 Langdrum Lane

City State Zip Code  
Chevy Chase MD 20815

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
OpenAir

Occupation  
Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 3 / 2 0 0 7

Transaction ID: C3593060

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

F. Gregory Ahern

Mailing Address 1343 28th Street, NW

City State Zip Code  
Washington DC 20007

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Investment Company Institute

Occupation  
Financial Services

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: C3615820

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

1500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 42

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Rhode Island Hope PAC

**A.**

Full Name (Last, First, Middle Initial)

Alan C. Fox

Mailing Address 12411 Ventura Boulevard

City State Zip Code

Studio City CA 91604

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
ACF Property Management

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: C3615830

Amount of Each Receipt this Period

5000.00

**B.**

Full Name (Last, First, Middle Initial)

William A. Brewer, III

Mailing Address 1717 Main Street  
Suite 4800

City State Zip Code

Washington DC 75201

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Bickel & Brewer

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 3 1 / 2 0 0 7

Transaction ID: C3637050

Amount of Each Receipt this Period

5000.00

**C.**

Full Name (Last, First, Middle Initial)

Russell Holdstein

Mailing Address Two Buckeye Way

City State Zip Code

Kentfield CA 94904

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self Employed

Occupation  
Businessman

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 9 / 2 0 0 7

Transaction ID: C3616450

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

11000.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 42

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Rhode Island Hope PAC

**A.**

Full Name (Last, First, Middle Initial)

Michael J. Perik

Mailing Address 170 Westfield Drive

City

East Greenwich

State

RI

Zip Code

02818

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Princeton Review

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 2 5 / 2 0 0 7

Transaction ID: C3600691

Amount of Each Receipt this Period

5000.00

**B.**

Full Name (Last, First, Middle Initial)

George M. Cappello

Mailing Address 942 Park Avenue

City

Cranston

State

RI

Zip Code

02910

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Law Offices Of George M.  
Cappello

Occupation

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 2 / 2 0 0 7

Transaction ID: C3563751

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Jonathan S. Lavine

Mailing Address 11 Brent Road

City

Lexington

State

MA

Zip Code

02420

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Bain Capital LLC

Occupation

Investor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 1 / 2 0 0 7

Transaction ID: C3634511

Amount of Each Receipt this Period

2000.00

**SUBTOTAL** of Receipts This Page (optional) .....

7500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 42

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Rhode Island Hope PAC

**A.**

Full Name (Last, First, Middle Initial)

Anthony T. Podesta

Mailing Address 1001 G Street, NW  
Suite 900E

City State Zip Code  
Washington DC 20001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Podesta Group

Occupation  
Chairman

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 1 / 2 0 0 7

Transaction ID: C3631561

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Ann M. Backer

Mailing Address 480 Park Avenue

City State Zip Code  
New York NY 10022

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
N/A

Occupation  
Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 7

Transaction ID: C3626501

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

Jonathan J. Sures

Mailing Address 9560 Wilshire Boulevard

City State Zip Code  
Beverly Hills CA 90212

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
United Talent Agency

Occupation  
Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: C3615821

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

3000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 42

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Rhode Island Hope PAC

**A.**

Full Name (Last, First, Middle Initial)

Avery Seavey

Mailing Address 115 Central Park West

City

New York

State

NY

Zip Code

10016

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation  
Investor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 1 9 / 2 0 0 7

Transaction ID: C3632281

Amount of Each Receipt this Period

2500.00

**B.**

Full Name (Last, First, Middle Initial)

Henry D. Shaw

Mailing Address 42 Woodridge Road

City

Wayland

State

MA

Zip Code

01778

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 2 / 2 0 0 7

Transaction ID: C3563752

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Lavinia B. Snyder

Mailing Address 40 East 83rd Street

City

New York

State

NY

Zip Code

10028

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Aurora Libris

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 0 7 / 2 0 0 7

Transaction ID: C3628242

Amount of Each Receipt this Period

2500.00

**SUBTOTAL** of Receipts This Page (optional) .....

5250.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 42

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Rhode Island Hope PAC

**A.**

Full Name (Last, First, Middle Initial)

William J. Gilbane, Jr.

Mailing Address 7 Jackson Walkway

City

Providence

State

RI

Zip Code

02903

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Gilbane Building Company

Occupation

Construction Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 7

Transaction ID: C3636262

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Donald R. Sweitzer

Mailing Address 250 Major Potter Road

City

Warwick

State

RI

Zip Code

02886

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GTECH

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 7

Transaction ID: C3626502

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

John J. McConnell, Jr.

Mailing Address 750 Elmgrove Avenue

City

Providence

State

RI

Zip Code

02906

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Ness Motley Loadholt

Occupation

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 0 7 / 2 0 0 7

Transaction ID: C3632382

Amount of Each Receipt this Period

2500.00

**SUBTOTAL** of Receipts This Page (optional) .....

4000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 42

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Rhode Island Hope PAC

**A.**

Full Name (Last, First, Middle Initial)

Susan E. Holmes

Mailing Address 223 West 19th Street  
Apartment 6

City State Zip Code  
New York NY 10011

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
N/A

Occupation  
Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 0 3 / 2 0 0 7

Transaction ID: C3626503

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Michael Solitro, III

Mailing Address 72 Tomahawk Trail

City State Zip Code  
Cranston RI 02921

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
N/A

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 2 / 2 0 0 7

Transaction ID: C3563753

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Ernest P. Baptista, Jr.

Mailing Address 14 Stevens Road

City State Zip Code  
Cranston RI 02910

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Gencorp Insurance Group

Occupation  
Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 0 7 / 2 0 0 7

Transaction ID: C3628243

Amount of Each Receipt this Period

2500.00

**SUBTOTAL** of Receipts This Page (optional) .....

3000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 42

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Rhode Island Hope PAC

**A.**

Full Name (Last, First, Middle Initial)

James E. Moore

Mailing Address Five Ocean Lawn Lane

City

Newport

State

RI

Zip Code

02840

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 8 / 2 0 0 7

Transaction ID: C3636253

Amount of Each Receipt this Period

4000.00

**B.**

Full Name (Last, First, Middle Initial)

Kent Correll

Mailing Address 102 East 10th Street

City

New York

State

NY

Zip Code

10003

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: C3615833

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

Larry S. Kaneshiro

Mailing Address 99-555 Honohina Street

City

Aiea

State

HI

Zip Code

96701

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 2 / 2 0 0 7

Transaction ID: C3563754

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

5250.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 42

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Rhode Island Hope PAC

**A.**

Full Name (Last, First, Middle Initial)

Brook H. Byers

Mailing Address 2750 Sand Hill Road

City

Menlo Park

State

CA

Zip Code

94025

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Kleiner Perkins Caufield &  
Byers

Occupation

Venture Capital

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 0 5 / 2 0 0 7

Transaction ID: C3617794

Amount of Each Receipt this Period

5000.00

**B.**

Full Name (Last, First, Middle Initial)

John L. Drew

Mailing Address 10751 Loyola Drive

City

Los Altos

State

CA

Zip Code

94024

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Technology Crossover Vent-  
ures

Occupation

Principal

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 1 / 2 0 0 7

Transaction ID: C3623824

Amount of Each Receipt this Period

5000.00

**C.**

Full Name (Last, First, Middle Initial)

William Wachtel

Mailing Address 118 Riverside Drive

City

New York

State

NY

Zip Code

10024

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2916.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 7

Transaction ID: C3636254

Amount of Each Receipt this Period

2916.00

**SUBTOTAL** of Receipts This Page (optional) .....

12916.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 42

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Rhode Island Hope PAC

A.

Full Name (Last, First, Middle Initial)

Rauf Ashraf

Mailing Address P.O. Box 370

City State Zip Code

Brookline

MA

02446

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Ash Capital

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 1 0 / 0 5 / 2 0 0 7

Transaction ID: C3613664

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

John C. Ponte

Mailing Address 385 South Main Street

City State Zip Code

Providence

RI

02903

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation

Mortgage Banker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
 1 0 / 2 4 / 2 0 0 7

Transaction ID: C3615834

Amount of Each Receipt this Period

5000.00

C.

Full Name (Last, First, Middle Initial)

Janet G. Whitehouse

Mailing Address 7476 Frogtown Road

City State Zip Code

Marshall

VA

20115

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
 1 2 / 1 3 / 2 0 0 7

Transaction ID: C3631564

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional) .....

10500.00

TOTAL This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 42

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Rhode Island Hope PAC

**A.**

Full Name (Last, First, Middle Initial)

Joel W. McCleary

Mailing Address 1415 34th Street, NW

City

Washington

State

DC

Zip Code

20007

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Four Seasons Venture Capi-  
tal

Occupation

Management

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 3 1 / 2 0 0 7

Transaction ID: C3616454

Amount of Each Receipt this Period

5000.00

**B.**

Full Name (Last, First, Middle Initial)

Susan S. Kaneshiro

Mailing Address 99-555 Honohina Street

City

Aiea

State

HI

Zip Code

96701

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation

Book Seller

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 2 / 2 0 0 7

Transaction ID: C3563755

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Michael King

Mailing Address 9350 Wilshire Boulevard  
Suite 200

City

Beverly Hills

State

CA

Zip Code

90212

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
King World Productions

Occupation

Television Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 9 / 2 0 0 7

Transaction ID: C3563765

Amount of Each Receipt this Period

5000.00

**SUBTOTAL** of Receipts This Page (optional) .....

10250.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 42

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Rhode Island Hope PAC

**A.**

Full Name (Last, First, Middle Initial)

Dana S. Westring

Mailing Address P.O. Box 348

City

The Plains

State

VA

Zip Code

20198

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Poke GardensOccupation  
Designer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	5	/	2	0	0	7

Transaction ID: C3617795

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Frank DiBiase, Jr.

Mailing Address 2010 Mineral Spring Avenue

City

North Providence

State

RI

Zip Code

02911

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DiBiase AssociatesOccupation  
Real Estate

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	4	/	2	0	0	7

Transaction ID: C3615825

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

William S. Reese

Mailing Address 409 Temple Street

City

New Haven

State

CT

Zip Code

06511

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
William Reese CompanyOccupation  
Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	1	9	/	2	0	0	7

Transaction ID: C3563766

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional) .....

2250.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 42

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Rhode Island Hope PAC

**A.**

Full Name (Last, First, Middle Initial)

F. Gregory Ahern

Mailing Address 1343 28th Street, NW

City

Washington

State

DC

Zip Code

20007

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Investment Company Instit-  
ute

Occupation

Financial Services

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 6 / 2 0 0 7

Transaction ID: C3569796

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

Ellen T. Drew

Mailing Address 10751 Loyola Drive

City

Los Altos

State

CA

Zip Code

94024

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 1 / 2 0 0 7

Transaction ID: C3623826

Amount of Each Receipt this Period

5000.00

**C.**

Full Name (Last, First, Middle Initial)

Anthony T. Podesta

Mailing Address 1001 G Street, NW  
Suite 900E

City

Washington

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Podesta Group

Occupation

Chairman

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 0 5 / 2 0 0 7

Transaction ID: C3617796

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

5600.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 42

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Rhode Island Hope PAC

**A.**

Full Name (Last, First, Middle Initial)

Elizabeth N. Holmes

Mailing Address 7323 Masonville Drive

City

Annandale

State

VA

Zip Code

22003

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Navy Federal Credit Union

Occupation  
Clerk

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 0 2 / 2 0 0 7

Transaction ID: C3587616

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Darius P. Maanaui

Mailing Address 1001 5th Avenue

City

New York

State

NY

Zip Code

10028

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Merrill Lynch

Occupation  
Managing Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 7

Transaction ID: C3636256

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

Duncan A. Chapman

Mailing Address 106 East 85th Street

City

New York

State

NY

Zip Code

10028

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Lexington Partners, Inc.

Occupation  
Investor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 9 / 2 0 0 7

Transaction ID: C3632386

Amount of Each Receipt this Period

5000.00

**SUBTOTAL** of Receipts This Page (optional) .....

6500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 42

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Rhode Island Hope PAC

**A.**

Full Name (Last, First, Middle Initial)

George Grayson

Mailing Address 2540 Massachusetts Avenue, NW  
Apartment 203

City State Zip Code  
Washington DC 20008

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Brown Advisory

Occupation  
Investment Advisor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 0 5 / 2 0 0 7

Transaction ID: C3617797

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Robert L. Ruben

Mailing Address 4800 Montgomery Lane  
Suite 150

City State Zip Code  
Bethesda MD 20814

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Ruben & Aronson, LLP

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 0 9 / 2 0 0 7

Transaction ID: C3591637

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Alison K. Townsend

Mailing Address 63 Alfred Drowne Road

City State Zip Code  
Barrington RI 02806

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self Employed

Occupation  
Yacht Management

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: C3615817

Amount of Each Receipt this Period

5000.00

**SUBTOTAL** of Receipts This Page (optional) .....

6250.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 42

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Rhode Island Hope PAC

**A.**

Full Name (Last, First, Middle Initial)

Joshua A. Grossman

Mailing Address 30 Huntington Road

City

Newton

State

MA

Zip Code

02458

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation  
Student

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: C3615837

Amount of Each Receipt this Period

1500.00

**B.**

Full Name (Last, First, Middle Initial)

John P. Cooper

Mailing Address 3925 Woodlawn Drive

City

Nashville

State

TN

Zip Code

37205

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation  
Real Estate

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 6 / 2 0 0 7

Transaction ID: C3616878

Amount of Each Receipt this Period

2000.00

**C.**

Full Name (Last, First, Middle Initial)

Jay R. Schochet

Mailing Address 175 Federal Street  
Suite 700

City

Boston

State

MA

Zip Code

02110

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Schochet Associates, Inc.

Occupation  
Developer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 9 / 2 0 0 7

Transaction ID: C3563758

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

4500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 42

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Rhode Island Hope PAC

**A.**

Full Name (Last, First, Middle Initial)

Sybil M. D'Origny

Mailing Address 10 Rue de L'Universite

City

State

Zip Code

Paris, France

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation

Homemaker

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 0 5 / 2 0 0 7

Transaction ID: C3617808

Amount of Each Receipt this Period

3000.00

**B.**

Full Name (Last, First, Middle Initial)

George W. Krumme

Mailing Address 2300 Riverside Drive  
Unit 16-E

City

State

Zip Code

Tulsa

OK

74114

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation

Oil Production

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 6 / 2 0 0 7

Transaction ID: C3569798

Amount of Each Receipt this Period

2000.00

**C.**

Full Name (Last, First, Middle Initial)

Mark S. Mandell

Mailing Address 1 Park Row

City

State

Zip Code

Providence

RI

02903

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Mandell Schwartz & Boiscl-  
air

Occupation

Attorney

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 0 9 / 2 0 0 7

Transaction ID: C3591638

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

6000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 42

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Rhode Island Hope PAC

**A.**

Full Name (Last, First, Middle Initial)

Steven Nightingale

Mailing Address P.O. Box 2071

City

Reno

State

NV

Zip Code

89505

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation

Writer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 7

Transaction ID: C3636258

Amount of Each Receipt this Period

2500.00

**B.**

Full Name (Last, First, Middle Initial)

Heather Podesta

Mailing Address 2651 Woodley Road, NW

City

Washington

State

DC

Zip Code

20008

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Heather Podesta & Partner-  
s, LLC

Occupation

Member

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: C3615838

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

Alice McInerney

Mailing Address 510 East 86th Street  
Apartment 11B

City

New York

State

NY

Zip Code

10028

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Kirby McInerney & Squire,  
LLP

Occupation

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 6 / 2 0 0 7

Transaction ID: C3563759

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

4500.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 42

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Rhode Island Hope PAC

**A.**

Full Name (Last, First, Middle Initial)

Joseph A. Caramadre

Mailing Address 90 Beechwood Drive

City

Cranston

State

RI

Zip Code

02921

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Estate Planning Resources

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 0 5 / 2 0 0 7

Transaction ID: C3617789

Amount of Each Receipt this Period

5000.00

**B.**

Full Name (Last, First, Middle Initial)

Edwynne F. Krumme

Mailing Address 2300 Riverside Drive  
Unit 16-E

City

Tulsa

State

OK

Zip Code

74114

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 6 / 2 0 0 7

Transaction ID: C3569799

Amount of Each Receipt this Period

5000.00

**C.**

Full Name (Last, First, Middle Initial)

Theodore H. Bornstein

Mailing Address 909 East Capitol Street, SE

City

Washington

State

DC

Zip Code

20003

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Foley & Lardner, LLP

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 0 2 / 2 0 0 7

Transaction ID: C3587619

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

11000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 42

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Rhode Island Hope PAC

**A.**

Full Name (Last, First, Middle Initial)

Louis M. Aronson

Mailing Address 6917 Anchorage Drive

City

Bethesda

State

MD

Zip Code

20817

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Ruben & Aronson, LLP

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 0 9 / 2 0 0 7

Transaction ID: C3591639

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Gerald T. Harrington

Mailing Address 209 Blackberry Hill Drive

City

South Kingston

State

RI

Zip Code

02879

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Capitol City Group, LLC

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 7

Transaction ID: C3636259

Amount of Each Receipt this Period

2000.00

**C.**

Full Name (Last, First, Middle Initial)

Elizabeth E. Meyer

Mailing Address 32 Church Street

City

Newport

State

RI

Zip Code

02840

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation  
Yacht Management

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: C3615819

Amount of Each Receipt this Period

5000.00

**SUBTOTAL** of Receipts This Page (optional) .....

8000.00

**TOTAL** This Period (last page this line number only) .....

139266.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 / 42

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Rhode Island Hope PAC

**A.**

Full Name (Last, First, Middle Initial)

American Association For Justice PAC

Mailing Address 1050 31st Street, NW

City

Washington

State

DC

Zip Code

20007

FEC ID number of contributing  
federal political committee.

**C** C00024521

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 1 / 2 0 0 7

Transaction ID: C3634510

Amount of Each Receipt this Period

2500.00

**B.**

Full Name (Last, First, Middle Initial)

American Federation Of Teachers COPE

Mailing Address 555 New Jersey Avenue, NW

City

Washington

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.

**C** C00028860

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 7

Transaction ID: C3632670

Amount of Each Receipt this Period

5000.00

**C.**

Full Name (Last, First, Middle Initial)

Int'l Brotherhood Of Electrical Workers COPE

Mailing Address 900 Seventh Street, NW

City

Washington

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.

**C** C00027342

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 0 2 / 2 0 0 7

Transaction ID: C3587615

Amount of Each Receipt this Period

2500.00

**SUBTOTAL** of Receipts This Page (optional) .....

10000.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 / 42

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
------------------------------	------------------------------	---	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Rhode Island Hope PAC

**A.**Full Name (Last, First, Middle Initial)  
New York Life Insurance Company PACMailing Address 51 Madison Avenue  
Room 1109

City	State	Zip Code
New York	NY	10010

FEC ID number of contributing  
federal political committee.**C** C00158881

Name of Employer

Occupation

Receipt For:

☐ Primary
 ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	8		2	0	0	7

Transaction ID: C3632289

Amount of Each Receipt this Period

2500.00

SUBTOTAL of Receipts This Page (optional) .....

2500.00

TOTAL This Period (last page this line number only) .....

12500.00

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 29 / 42

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
Rhode Island Hope PAC

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) NGP Software</p> <p>Mailing Address 1225 Eye Street, NW Suite 1225</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Software License</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D124740  <b>Date of Disbursement</b>  <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 4 / 2 0 0 7</div> </p> <p><b>Amount of Each Disbursement this Period</b>  <div>2000.00</div> </p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Campaign Finance Consultants</p> <p>Mailing Address 10 G Street, NW Suite 470</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Fundraising Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D114850  <b>Date of Disbursement</b>  <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 8 / 2 0 0 7</div> </p> <p><b>Amount of Each Disbursement this Period</b>  <div>3002.40</div> </p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) American Express</p> <p>Mailing Address P.O. Box 53852</p> <p>City Phoenix State AZ Zip Code 85072</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D133751  <b>Date of Disbursement</b>  <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 3 / 2 0 0 7</div> </p> <p><b>Amount of Each Disbursement this Period</b>  <div>2.95</div> </p>

**SUBTOTAL** of Disbursements This Page (optional) .....

**5005.35**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 30 / 42

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Rhode Island Hope PAC

**A.**

Full Name (Last, First, Middle Initial)  
Perkins Coie

Mailing Address 607 14th Street, NW  
Suite 800

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Legal & Accounting Services

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D124741

Date of Disbursement

/   /

Amount of Each Disbursement this Period

501.18

**B.**

Full Name (Last, First, Middle Initial)  
American Express

Mailing Address P.O. Box 53852

City Phoenix State AZ Zip Code 85072

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D133752

Date of Disbursement

/   /

Amount of Each Disbursement this Period

147.50

**C.**

Full Name (Last, First, Middle Initial)  
Campaign Finance Consultants

Mailing Address 10 G Street, NW  
Suite 470

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Fundraising Consulting Services

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D129412

Date of Disbursement

/   /

Amount of Each Disbursement this Period

3006.30

**SUBTOTAL** of Disbursements This Page (optional) .....

3654.98

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 31 / 42

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
Rhode Island Hope PAC

**A.**

Full Name (Last, First, Middle Initial)  
Perkins Coie

Mailing Address 607 14th Street, NW  
Suite 800

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Legal & Accounting Services

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D124742

Date of Disbursement

/   /

Amount of Each Disbursement this Period

3001.41

**B.**

Full Name (Last, First, Middle Initial)  
American Express

Mailing Address P.O. Box 53852

City Phoenix State AZ Zip Code 85072

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D133753

Date of Disbursement

/   /

Amount of Each Disbursement this Period

354.00

**C.**

Full Name (Last, First, Middle Initial)  
Campaign Finance Consultants

Mailing Address 10 G Street, NW  
Suite 470

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Fundraising Consulting Services

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D129413

Date of Disbursement

/   /

Amount of Each Disbursement this Period

3042.31

**SUBTOTAL** of Disbursements This Page (optional) .....

6397.72

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 32 / 42

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
Rhode Island Hope PAC

**A.**

Full Name (Last, First, Middle Initial)  
Campaign Finance Consultants

Mailing Address 10 G Street, NW  
Suite 470

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Fundraising Consulting Services

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D133163

Date of Disbursement

/   /

Amount of Each Disbursement this Period

3088.01

**B.**

Full Name (Last, First, Middle Initial)  
American Express

Mailing Address P.O. Box 53852

City Phoenix State AZ Zip Code 85072

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D133754

Date of Disbursement

/   /

Amount of Each Disbursement this Period

29.50

**C.**

Full Name (Last, First, Middle Initial)  
Perkins Coie

Mailing Address 607 14th Street, NW  
Suite 800

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Legal & Accounting Services

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D129414

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1500.50

**SUBTOTAL** of Disbursements This Page (optional) .....

4618.01

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Rhode Island Hope PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Whitehouse For Senate	<b>Transaction ID:</b> D126406 <b>Date of Disbursement</b>																				
Mailing Address P.O. Box 40280	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	4		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		1	4		2	0	0	7												
City Providence State RI Zip Code 02940	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement List Rental Fee	<table border="1"> <tr> <td>3</td><td>5</td><td>5</td><td>.</td><td>3</td><td>0</td> </tr> </table>	3	5	5	.	3	0														
3	5	5	.	3	0																
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Campaign Finance Consultants	<b>Transaction ID:</b> D126407 <b>Date of Disbursement</b>																				
Mailing Address 10 G Street, NW Suite 470	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	7		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		1	7		2	0	0	7												
City Washington State DC Zip Code 20002	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Fundraising Consulting Services	<table border="1"> <tr> <td>3</td><td>0</td><td>1</td><td>.</td><td>1</td><td>.</td><td>4</td><td>0</td> </tr> </table>	3	0	1	.	1	.	4	0												
3	0	1	.	1	.	4	0														
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) American Express	<b>Transaction ID:</b> D133768 <b>Date of Disbursement</b>																				
Mailing Address P.O. Box 53852	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	7		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		0	7		2	0	0	7												
City Phoenix State AZ Zip Code 85072	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Credit Card Processing Fee	<table border="1"> <tr> <td>7</td><td>.</td><td>3</td><td>8</td> </tr> </table>	7	.	3	8																
7	.	3	8																		
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**3374.08**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Rhode Island Hope PAC

**A.**

Full Name (Last, First, Middle Initial)  
Campaign Finance Consultants

Mailing Address 10 G Street, NW  
Suite 470

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Fundraising Consulting Services

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D124738

Date of Disbursement

/   /

Amount of Each Disbursement this Period

3050.02

**B.**

Full Name (Last, First, Middle Initial)  
American Express

Mailing Address P.O. Box 53852

City Phoenix State AZ Zip Code 85072

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D133769

Date of Disbursement

/   /

Amount of Each Disbursement this Period

221.25

**C.**

Full Name (Last, First, Middle Initial)  
H & W Printing

Mailing Address 3616 Oak Lane

City Mount Rainier State MD Zip Code 20712

Purpose of Disbursement  
Printing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D124739

Date of Disbursement

/   /

Amount of Each Disbursement this Period

4060.78

**SUBTOTAL** of Disbursements This Page (optional) .....

7332.05

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Rhode Island Hope PAC

**A.**

Full Name (Last, First, Middle Initial)

Perkins Coie

Mailing Address 607 14th Street, NW  
Suite 800

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Legal & Accounting Services

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D125899

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1503.71

**SUBTOTAL** of Disbursements This Page (optional) .....

1503.71

**TOTAL** This Period (last page this line number only) .....

31885.90

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
Rhode Island Hope PAC

**A.** Full Name (Last, First, Middle Initial)  
Rhode Island Democratic State Committee

Mailing Address P.O. Box 6004

City State Zip Code  
Providence RI 02940

Purpose of Disbursement  
2007 Contribution

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D131940

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1500.00

**B.** Full Name (Last, First, Middle Initial)  
Reed Committee

Mailing Address P.O. Box 8628

City State Zip Code  
Cranston RI 02920

Purpose of Disbursement  
Contribution

Candidate Name  
Jack Reed

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: RI District:

Transaction ID: D131941

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2700.00

**C.** Full Name (Last, First, Middle Initial)  
Reed Committee

Mailing Address P.O. Box 8628

City State Zip Code  
Cranston RI 02920

Purpose of Disbursement  
Contribution

Candidate Name  
Jack Reed

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: RI District:

Transaction ID: D131942

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2700.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
Rhode Island Hope PAC

**A.**

Full Name (Last, First, Middle Initial)  
Friends Of Mary Landrieu, Inc.

Mailing Address 607 14th Street, NW  
Suite 800

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Contribution

Candidate Name  
Mary L. Landrieu

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: LA District:

Transaction ID: D131773

Date of Disbursement

12 / 05 / 2007

Amount of Each Disbursement this Period

2700.00

**B.**

Full Name (Last, First, Middle Initial)  
Langevin For Congress

Mailing Address 181-A Knight Street

City Warwick State RI Zip Code 02886

Purpose of Disbursement  
Contribution

Candidate Name  
James R. Langevin

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: RI District: 02

Transaction ID: D131943

Date of Disbursement

09 / 27 / 2007

Amount of Each Disbursement this Period

2700.00

**C.**

Full Name (Last, First, Middle Initial)  
Friends Of Mary Landrieu, Inc.

Mailing Address 607 14th Street, NW  
Suite 800

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Contribution

Candidate Name  
Mary L. Landrieu

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: LA District:

Transaction ID: D131774

Date of Disbursement

12 / 05 / 2007

Amount of Each Disbursement this Period

2700.00

**SUBTOTAL** of Disbursements This Page (optional) .....

8100.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
Rhode Island Hope PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Udall For All of Us	<b>Transaction ID:</b> D133174
Mailing Address P.O. Box 208	Date of Disbursement
City Santa Fe State NM Zip Code 87504	<div> <div>12</div> <div>20</div> <div>2007</div> </div>
Purpose of Disbursement Contribution	Amount of Each Disbursement this Period
Candidate Name Tom Udall	5000.00
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Category/ Type
State: NM District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Tom Allen For Senate	<b>Transaction ID:</b> D131775
Mailing Address 550 Forest Avenue Suite 101	Date of Disbursement
City Portland State ME Zip Code 04112	<div> <div>12</div> <div>05</div> <div>2007</div> </div>
Purpose of Disbursement Contribution	Amount of Each Disbursement this Period
Candidate Name Thomas H. Allen	2700.00
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Category/ Type
State: ME District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Mark Pryor For U.S. Senate	<b>Transaction ID:</b> D131935
Mailing Address P.O. Box 2720	Date of Disbursement
City Little Rock State AR Zip Code 72203	<div> <div>12</div> <div>17</div> <div>2007</div> </div>
Purpose of Disbursement Contribution	Amount of Each Disbursement this Period
Candidate Name Mark Lunsford Pryor	5000.00
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Category/ Type
State: AR District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

12700.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
Rhode Island Hope PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Udall For All of Us Mailing Address P.O. Box 208	<b>Transaction ID:</b> D133175 <b>Date of Disbursement</b> <div> <div>12</div> <div>20</div> <div>2007</div> </div>
City Santa Fe State NM Zip Code 87504 Purpose of Disbursement Contribution Candidate Name Tom Udall Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NM District:	<b>Amount of Each Disbursement this Period</b> <div>5000.00</div>
<b>B.</b> Full Name (Last, First, Middle Initial) Hillary Clinton For President Mailing Address P.O. Box 101436 City Arlington State VA Zip Code 22210 Purpose of Disbursement Contribution Candidate Name Hillary Rodham Clinton Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> D128396 <b>Date of Disbursement</b> <div> <div>09</div> <div>27</div> <div>2007</div> </div> <b>Amount of Each Disbursement this Period</b> <div>5000.00</div>
<b>C.</b> Full Name (Last, First, Middle Initial) Tom Allen For Senate Mailing Address 550 Forest Avenue Suite 101 City Portland State ME Zip Code 04112 Purpose of Disbursement Contribution Candidate Name Thomas H. Allen Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: ME District:	<b>Transaction ID:</b> D131776 <b>Date of Disbursement</b> <div> <div>12</div> <div>05</div> <div>2007</div> </div> <b>Amount of Each Disbursement this Period</b> <div>2700.00</div>

**SUBTOTAL** of Disbursements This Page (optional) .....

**12700.00**

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Rhode Island Hope PAC**A.**

Full Name (Last, First, Middle Initial)

Mark Pryor For U.S. Senate

Mailing Address P.O. Box 2720

City Little Rock State AR Zip Code 72203

Purpose of Disbursement  
ContributionCandidate Name  
Mark Lunsford PryorCategory/  
TypeOffice Sought: ☐ House  
☒ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: AR District:

Transaction ID: D131936

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	7		2	0	0	7

Amount of Each Disbursement this Period

5000.00

**B.**

Full Name (Last, First, Middle Initial)

Hillary Clinton For President

Mailing Address P.O. Box 101436

City Arlington State VA Zip Code 22210

Purpose of Disbursement  
ContributionCandidate Name  
Hillary Rodham ClintonCategory/  
TypeOffice Sought: ☐ House  
☐ Senate  
☒ PresidentDisbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D133176

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	9		2	0	0	7

Amount of Each Disbursement this Period

5000.00

**C.**

Full Name (Last, First, Middle Initial)

Langevin For Congress

Mailing Address 181-A Knight Street

City Warwick State RI Zip Code 02886

Purpose of Disbursement  
ContributionCandidate Name  
James R. LangevinCategory/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: RI District: 02

Transaction ID: D126527

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	6		2	0	0	7

Amount of Each Disbursement this Period

2300.00

SUBTOTAL of Disbursements This Page (optional) .....

12300.00

TOTAL This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
Rhode Island Hope PAC

**A.** Full Name (Last, First, Middle Initial)  
Democratic National Committee

Mailing Address 430 South Capitol Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
2007 Contribution

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D131777

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
1 2 / 0 5 / 2 0 0 7

Amount of Each Disbursement this Period

1000.00

**B.** Full Name (Last, First, Middle Initial)  
Langevin For Congress

Mailing Address 181-A Knight Street

City Warwick State RI Zip Code 02886

Purpose of Disbursement  
Contribution

Candidate Name  
James R. Langevin

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: RI District: 02

Transaction ID: D131937

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
1 1 / 1 5 / 2 0 0 7

Amount of Each Disbursement this Period

5000.00

**C.** Full Name (Last, First, Middle Initial)  
Friends Of Senator Carl Levin

Mailing Address 10 G Street, NE  
Suite 470

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Contribution

Candidate Name  
Carl Levin

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District:

Transaction ID: D133177

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
1 2 / 1 8 / 2 0 0 7

Amount of Each Disbursement this Period

5000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

11000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Rhode Island Hope PAC

A.

Full Name (Last, First, Middle Initial)  
Tim Johnson For South Dakota, Inc.

Mailing Address P.O. Box 1859

City State Zip Code  
Sioux Falls SD 57101

Purpose of Disbursement  
Contribution

Candidate Name  
Tim Johnson

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: SD District:

Transaction ID: D131938

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2700.00

B.

Full Name (Last, First, Middle Initial)  
Friends Of Senator Carl Levin

Mailing Address 10 G Street, NE  
Suite 470

City State Zip Code  
Washington DC 20002

Purpose of Disbursement  
Contribution

Candidate Name  
Carl Levin

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MI District:

Transaction ID: D133178

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

C.

Full Name (Last, First, Middle Initial)  
Tim Johnson For South Dakota, Inc.

Mailing Address P.O. Box 1859

City State Zip Code  
Sioux Falls SD 57101

Purpose of Disbursement  
Contribution

Candidate Name  
Tim Johnson

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: SD District:

Transaction ID: D131939

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2700.00

**SUBTOTAL** of Disbursements This Page (optional) .....

10400.00

**TOTAL** This Period (last page this line number only) .....

74100.00